



CERTIFICATION OF WORK

(To be completed by the Contractor and saved in the Contractor's CMMS)

FACID/Building: VA039 Date of Visit: 9-JUN-2025

Contractor Personnel on Site:

1. Aaron Skeens
2. _____

Work Performed:

Preventive Maintenance - Services Completed (Annual, Quarterly, Monthly, equipment identification, etc.)

1. WO18960 WO19050 WO19067 WO19068 WO19069 JUN PM
WO18961 WO19058

Service Calls – Service Call Number and Description

1. CSS# Circulating pumps, HW storage and expansion tank is
2. CSS# working properly with no issues. 1 FE hydro failed.
3. CSS# All Mini Split filters changed. 1 Expansion tank abandoned.
-AS

CERTIFICATION OF WORK

Hydro fail on one FE in building 1
Only 1 expansion tank used at VA039.

To be signed by the Contractor:

Print Name: Gregory Rasnick Date: 9-JUN-2025

Signed: GR

To be signed by Facility Manager:

By signing the Certification of Work, I certify that the above-named individuals representing the Contractor arrived on site and to the best of my knowledge, completed the stated work listed. This is **NOT** a Certification that the Work was performed correctly – The COW simply verifies that that someone representing the Contractor was onsite and accomplished something

Print Name/Rank: Aaron Skeens Date: 9-JUN-2025

Signed: [Signature]

E-Mail: _____



